

Missouri Department of Labor and Industrial Relations
DIVISION OF WORKERS' COMPENSATION



This employer is operating under and subject to the provisions of the Missouri Workers' Compensation Law.

**If A Work Injury
Occurs . . .**

Missouri law guarantees certain benefits to employees who are injured or become ill because of their jobs. Any job related injury or illness is covered. The key is whether it was caused by the job. (Some injuries from an off-duty company, social or athletic activity - for example, the company picnic or the department bowling team - may not be covered.) Check with your supervisor if you have any questions.

**Workers'
Compensation
Benefits
Include . . .**

★ **Medical Care.** All medical treatment - without a deductible to the employee or dollar limit. Costs are paid directly by your employer's insurance company, so you should not receive a bill. If you do receive a bill, give it to the employer's designated representative or contact the insurer listed below.

Your employer will arrange for medical treatment. If you want to change doctors you must get prior authorization from the employer. If you go to a doctor without prior authorization it is at your expense.

★ **Payment for Lost Wages.** If you are temporarily disabled by a job injury or illness, you will receive tax-free income until the doctor says you are able to return to work. Payments are two-thirds of your average weekly wage, up to a maximum rate set by state law. Payments are not made for the first three days or less that your employer is open for business, unless you are unable to work more than 14 calendar days. If you do not receive a check, contact the insurer listed below. If the injury or illness results in a permanent disability, you may be entitled to receive either permanent partial or permanent total disability benefits. If the injury results in death, benefits will be paid to surviving dependents.

**In The Event
Of A
Work Injury . . .**

Employer Must:

1. Be sure first aid is given.
2. See that the injured employee is directed to a doctor or hospital, if necessary.

Employee Must:

1. Report the injury IMMEDIATELY to your supervisor or _____
(Employee Representative)
at _____ (Phone Number).

A delay of more than thirty (30) days in reporting an accident in writing may result in loss of right to compensation benefits.

2. If you have questions about Workers' Compensation, your employer will supply you with additional information or you may contact an Information Specialist at the Division of Workers' Compensation 1-800-775-COMP.

**Insurer/Adjusting
or
Service Company**

Name _____

Address _____

Phone Number _____

or Designated Individual If Self-Insured

If Noncompliance Occurs . . .

Contact 1-800-592-6003 if you believe your employer does not:

1. Insure his/her employees with workers' compensation insurance. (Coverage is required for employers who have five or more employees, one or more if in the construction industry.)
2. Report employee injuries to the Division of Workers' Compensation.
3. Post workers' compensation notices at all work areas.

★ Noncompliance by an employer is unlawful and is subject to a \$25,000 fine or twice the annual premium of the policy, whichever is greater or is also subject to criminal prosecution by the State of Missouri.

If Fraud Occurs . . .

Contact 1-800-592-6003 if you suspect fraudulent action by one of the following:

1. An employee, employer, insurer, physician, attorney or others involved in the filing of a false workers' compensation claim.
2. Misrepresentation of job classifications made by an employer or an insurer.

★ Fraud is unlawful and subject to criminal prosecution by the state of Missouri.

If you have questions or need more information about Workers' Compensation benefits, contact an Information Specialist at:

Missouri Division of Workers' Compensation
3315 West Truman Blvd., P.O. Box 58
Jefferson City, MO 65102-0058
1-800-775-COMP* • TDD 1-800-735-2966

*This toll-free number is provided for employee's questions only. Section 287.126 RSMo. Other persons with questions may call 573/751-4231 for information and assistance. This poster must be displayed in its original size 11 x 17.

Workplace Safety Contact

The Missouri Division of Workers' Compensation offers free safety services to Missouri employers through its Missouri Workers' Safety Program (MWSP). MWSP's main goals are to help employers reduce occupational injuries and control workers' compensation costs. The Division also certifies the safety engineering and management program that is provided to employers, upon request, by their insurance carriers.

★ Employers may contact MWSP at 1(800) 775-COMP or 573/526-3504, email mowsp@doldwcmail.dolir.state.mo.us for information about workplace safety or for a registry of safety consultants and safety engineers who are certified by the Division.

★ Employees are urged to direct safety related questions to their employer's designated safety person.

The Division of Workers' Compensation does not discriminate against individuals with disabilities as mandated by P.L. 101-336, The Americans With Disabilities Act. Alternative format available upon request.

Required by Section 287.127 RSMo